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OMB No.: 0938-0193

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

Territory: Guam

A. INCOME ELIGIBILITY LEVELS -- CATEGORICALLY NEEDY STANDARD MONTHLY SCHEDULE FOR BASIC INDIVIDUAL REQUIREMENTS

amily Members in ssistance Group	FOOD	CLOTHING	PERSONAL	HOUSEHOLD	TOTAL
1	\$ 40.87	\$10.82	\$ 4.21	\$ 4.10	\$ 60.00
2	81.74	21.64	8.41	8.20	120.0
3	112.40	29.77	11.57	11.26	165.0
	143.60	37.90	14.72	14.32	210.0
4 5	163.50	43.31	16.82	16.37	240.0
6	183.94	48.72	18.92	18.42	270.0
7	194.16	51.43	19.97	19.44	285.0
ν Ω	204.37	54.13	21.03	20.47	300.0
8 9	214.59	56.84	22.08	21.49	315.0
10	224.81	59.55	23.13	22.51	330.0
11	229.92	60.90	23.66	23.52	338.0
12	235.03	62.25	24.19	23.53	345.0
13	240.14	63.60	24.72	24.54	353.0
13	245.25	64.95	25,25	24.55	360.0
15	250.36	66.30	25.78	25.56	368.0

SPECIAL NEEDS

Special need for shelter may be allowed as paid by to the following A) Shelter: maximum:

Number of Persons in Assistance Groups	Monthly Allowance
1 - 2	\$60.00
3 - 6	75.00
7 and over	90.00

Shelter payments may be authorized for rental payment for clients living in rental units based on uniform standards set by the agency. In no event can payments exceed ceilings indicated above.

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STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

Territory: Guam

A. INCOME ELIGIBILITY LEVELS -- CATEGORICALLY NEEDY

Utlities: B) Special need for utilities may be allowed in the budget if needed and not otherwise provided up to the following maximum:

1) Power

Number of Persons in Assistance Group	Monthly Allowance
0 - 4	\$ 10.00 11.00
10 and over	12.00

2) Water

Number of Persons in Assistance Group	Monthly Allowance
0 - 4	\$ 5.00
5 - 9	5.50
10 and over	6.00

- 3) Five Dollars and Fifty Cents (\$5.50) per month for fuel need for cooking, e.g. kerosene.
- An allowance of \$4.50 per family will be given only in those 4) cases where telephone is available in the house.

NOTE: When living arrangements are shared with non-eligible persons, only the recipient's actual share of cost (up to the maximum allowance will be computed as a special need.

C) The following allowance for special diet will be allowed in Therapeutic Diet: lieu of the standard food item only upon the written recommendation of competent medical authority.

STANDARD MONTHLY THERAPEUTIC DIET SCHEDULE

	DAILY	WEEKLY	MONTHLY
Breakfast Lunch Dinner	\$.56 .88 .88	\$ 3.92 7.82 7.82	\$15.68 31.28 31.28
TOTAL	\$2.32	\$19.52	\$78.24

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SUPPLEMENT 1 TO ATTACHMENT 2.6-A (BERC) Revision: HCFA-PM-87-4 Page 1C MARCH 1987 OMB No.: 0938-0193 STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT Territory: <u>Guam</u> A. INCOME ELIGIBILITY LEVELS--CATEGORICALLY NEEDY D) The actual cost of laundry up to the ceiling specified below will be Laundry: included in the budget if a person is physically unable to do his laundry or has no laundry facilities and no one to provide this service for him without It will be provided solely for a person living alone or with another physically handicapped individual. ITEM MAXIMUM MONTHLY ALLOWANE PER PERSON Men's Clothing \$15.00 Women's Clothing 20.00 Room and Board: Recipients of OAA, AB, and APTD may be allowed room and board in E) lieu of other basic needs when they are living in the household of other persons. Room and Board ----\$60.00 Personal Needs -Room, Board, and Care: The grant for recipients of CAA, AB, and APID, living in F) certified boarding homes for the aged, will be computed at the following rate in lieu of all other allowance provided in these standards. \$100.00

Special need for room, board, and care is allowable if all of the following conditions are applicable:

- 1) The recipient is in need of this type of placement, as certified by a social worker and/or a medical consultant.
- 2) The boarding home is certified by the agency to provided room, board, and and care.
- 3) Certificates are issued in accordance with standards fixed by the Department of Public Health and Social Services.
- 4) The recipient is living in a boarding home verified by a social worker.

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STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

Territory:	Guam

B. INCOME ELIGIBILITY LEVELS--OPTIONAL CATEGORICALLY NEEDY GROUPS WITH INCOMES UP TO FEDERAL POVERTY LINE

1. Pregnant Women, Infants, and Children

The levels for determining income eligibility for groups of pregnant women, infants, and children under the provisions of section 1902(1)(2) of the Act are as follows:

Based on ____ percent of the official Federal nonfarm income poverty line:

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2. Aged and Disabled Individuals

The levels for determining income eligibility for groups of aged and disabled individuals under the provisions of section 1902(m)(4) of the Act are as follows:

Based on ____ percent of the official Federal nonfarm income poverty line:

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c.	INCOME ELIGIBILITY LEVELSOPTIONAL GROUP OF QUALIFIED MEDICARE BENEFICIARIES WITH INCOMES UP TO FEDERAL POVERTY LINE
	The levels for determining income eligibility for groups of qualified Medicare beneficiaries under the provisions of section $1905(p)(2)(A)$ of the Act are as follows:
	Based on percent of the official Federal nonfarm income poverty line:
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D. INCOME LEVELS - M	EDICALLY NEEDY	
Applicable to	all groups App	licable to:
(1) Family Size	(2) Net income level protected for maintenance /// urban only /// urban & rural	(3) Net income level for persons living in rural areas
1	\$	
2	<u>\$</u>	<u> </u>
3	\$	<u> </u>
4	\$	<u> </u>
5	<u> </u>	<u> </u>
6	\$	<u>\$</u>
	\$	\$
8	<u> </u>	\$
9	\$	<u> </u>
10 For each additional person, add:	\$	<u> </u>
TN No. 87-4 Supersedes TN No.	Approval Date	Rffective Date